# Case 16-11222 Doc 1 Filed 03/31/16 Entered 03/31/16 16:51:05 Desc Main Document Page 1 of 55 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No
Rizzo, Michael J. & Rizzo, Elizabe	eth	Chapter 7
	Debtor(s)	
	VERIFICATION OF C	CREDITOR MATRIX
		Number of Creditors16
The above-named Debtor(s) here	eby verifies that the list of cred	itors is true and correct to the best of my (our) knowledge.
Date: March 29, 2016		
	Debtor	

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 981537 El Paso, TX 79998-1537

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card Services Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850-5298

Citi 701 E 60th St N Sioux Falls, SD 57104-0432

Citibank/Best Buy Centralized Bankruptcy/CitiCorp Credit S PO Box 790040 Saint Louis, MO 63179-0040

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316 Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Kia Motors Finance 10550 Talbert Ave Fountain Valley, CA 92708-6031

Kia Motors Finance Co 10550 Talbert Ave Fountain Valley, CA 92708-6031

Syncb/Sleep Number C/o PO Box 965036 Orlando, FL 32896-5036

Synchrony Bank/Select Comfort Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Wells Fargo Dealer Services PO Box 3569 Rancho Cucamonga, CA 91729-3569

Wells Fargo Hm Mortgag 7255 Baymeadows Wa Des Moines, IA 50306 Wells Fargo Home Mtg Written Correspondence Resolutions MAC#X PO Box 10335 Des Moines, IA 50306-0335

Wfds/wds PO Box 1697 Winterville, NC 28590-1697  $_{\rm B201B~(Form~201B)}\text{Case,} 16\text{-}11222$ 

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Desc Main

Document Page 5 of 55 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:	Case No.	
Rizzo, Michael J. & Rizzo, Elizabeth	Chapter <b>7</b>	
Debtor(s)	•	
CERTIFICATION OF NOTICE TO CONSUME UNDER § 342(b) OF THE BANKRUPTCY	* *	
Certificate of [Non-Attorney] Bankruptcy Petiti	on Preparer	
f, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby contice, as required by § 342(b) of the Bankruptcy Code.	ertify that I delivered to the debtor the attached	
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankrup petition preparer is not an individual, so the Social Security number of the office principal, responsible person, or partner	
X	the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)	
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.		
Certificate of the Debtor		

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Rizzo, Michael J. & Rizzo, Elizabeth	X	3/29/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	3/29/2016
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this inforn	nation to identify your o	case:		
Debtor 1	Michael J. Rizzo			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth Rizzo			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo <b>Stateme</b> r		n for Indiv	riduals Filing Under Chapte	er 7 12/15
-	vidual filing under chap e claims secured by you		out this form if:	
You must file this	ver is earlier, unless the	ithin 30 days after yo	t expired. ou file your bankruptcy petition or by the date set t time for cause. You must also send copies to the c	
	ople are filing together te the form.	in a joint case, both	are equally responsible for supplying correct info	rmation. Both debtors must sign
	and accurate as possibl our name and case num		needed, attach a separate sheet to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any credito	ors that you listed in Pa		Creditors Who Have Claims Secured by Property (	Official Form 106D), fill in the
information be Identify the cre	editor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's <b>V</b>	Valla Farga Hama Mi	La.	□ O compared to the constraint of	E Ni
name:	Vells Fargo Home M	.g	☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	■ Yes
Description of	10226 Fireside Dr,	Chicago	Agreement.	■ res
property	Ridge, IL 60415-13		_ ~	
securing debt:	<b>g</b> c, cc		Retain the property and [explain]:  Retain and pay pursuant to contract	
securing debt.			Retain and pay pursuant to contract	_
Part 2: List Yo	our Unexpired Personal	Property Leases		
			Schedule G: Executory Contracts and Unexpired	Leases (Official Form 106G), fill in
the information b	elow. Do not list real es	state leases. Unexpi	red leases are leases that are still in effect; the leas stee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your u	nexpired personal prop	arty leases		Will the lease be assumed?
20001120 your u	noxpirou porconai prop	orty loadoo		Tim the loads as assumed.
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2 Rizzo, Michael J. & Rizzo, Elizabeth	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:  Part 3: Sign Below	□ No □ Yes
Under penalty of perjury, I declare that I have indicated my intention aboroperty that is subject to an unexpired lease.	out any property of my estate that secures a debt and any personal
Michael J. Rizzo Signature of Debtor 1	Elizabeth Rizzo Signature of Debtor 2
Date March 29, 2016	Date March 29, 2016

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	Writ	te the name that is on	Michael		Elizabeth
	your government-issued picture identification (for		First name		First name
	exar	nple, your driver's	J.		
	licer	se or passport).	Middle name		Middle name
		g your picture tification to your meeting	Rizzo		Rizzo
		ith the trustee.	Last name and Suffix (Sr., Jr., II, III)	Ī	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ide your married or			
	maio	den names.			
3.	you num	y the last 4 digits of r Social Security ber or federal vidual Taxpayer	xxx-xx-6417		xxx-xx-6208
	Iden (ITIN	ntification number			

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Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		10226 Fireside Dr Chicago Ridge, IL 60415-1311			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chap	oter 7						
		☐ Chap	oter 11						
		☐ Chap	oter 12						
		☐ Chap	oter 13						
8.	How you will pay the fee	ab If	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
						, sign and attach the Application for Individuals to Pay Th			
			•	<i>Installments</i> (Officia	,	only if you are filing for Chapter 7. By law, a judge may, bu			
		no yo	t required tur family si	o, waive your fee, a ze and you are unal	nd may do so only if your income	e is less than 150% of the official poverty line that applies I. If you choose this option, you must fill out the <i>Applicatio</i>			
).	Have you filed for bankruptcy within the last 8 years?	t ■ No. t □ Yes.							
			District		When	Case number			
			District		When	Case number			
			District	-	When	Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by	■ No □ Yes.							
	a business partner, or by an affiliate?								
	un unmuto.		Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has yo	our landlord obtained	d an eviction judgment against yo	ou and do you want to stay in your residence?			
				No. Go to line 12.					
				Voc Eill out Initial	Statement About an Eviction Iu	dgment Against You (Form 101A) and file it with this			

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Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

	Report About Any Bus			·			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	per, Street, City, State & ZIP Code			
	to this petition.		Chec	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate les. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of lons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 1116(1)(B).  I am not filing under Chapter 11.  I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupton.				
	0.0.0. § 101(012).	Пу	Code				
		☐ Yes.	Tami	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is	the hazard?			
	safety? Or do you own any property that needs immediate attention?		If immo	diate attention is			
	any property that needs			why is it needed?			

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Debtor 1 Debtor 2

Part 5:

Rizzo, Michael J. & Rizzo, Elizabeth

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:
You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Desc Main

Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

Par										
16.	What kind of debts do you have?			consumer debts? Consumer of sonal, family, or household purp		fined in 11 U.S.C.§ 101(8) as "incurred by an				
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you o	owe that are not consumer debt	ts or busines	ss debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any oble to distribute to unsecured of		erty is excluded and administrative expenses are				
	administrative expenses		■ No							
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 0	0 million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 0 □ \$10,000,001 - \$50 □ \$50,000,001 - \$10 □ \$100,000,001 - \$5	0 million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Par	7: Sign Below									
For	you	I have exa	mined this petition, and I dec	clare under penalty of perjury th	at the inform	nation provided is true and correct.				
				7, I am aware that I may proceailable under each chapter, and		le, under Chapter 7, 11,12, or 13 of title 11, United proceed under Chapter 7.				
			ney represents me and I did r ned and read the notice requ		ne who is not	an attorney to help me fill out this document, I				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
		<b>Michael</b> Signature	J. Rizzo of Debtor 1		zabeth Riza					
		Executed	March 29, 2016 MM / DD / YYYY	Exec		March 29, 2016 MM / DD / YYYY				

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Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	March 29, 2016
Signature of Attorney for Debtor	<del></del>	MM / DD / YYYY
Danielle E. Colyer		
Danielle E. Colyer, Attorney at Law		
Firm name		
161 N Clark St Ste 4700		
Chicago, IL 60601-3201		
Number, Street, City, State & ZIP Code		
Contact phone (312) 922-5152	Email address	dcolyer@colyerlaw.net
6276437 - IL		
Bar number & State		

			)ocume				
Fill in this infor	mation to identify your		iling:	ent Page 15 of 55			
Debtor 1	Michael J. Rizzo	Middle Nar	me	Last Name			
Debtor 2 (Spouse, if filing)	Elizabeth Rizzo First Name	Middle Nar	me	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN D	DISTRICT	OF ILLINOIS, EASTERN DIVIS	ION		
Case number							☐ Check if this is an amended filing
Schedu n each category, s nink it fits best. E	Be as complete and accur	be items. List an a	two marrie	once. If an asset fits in more than d people are filing together, both n. On the top of any additional pa	are equally respon	sible for supp	plying correct
nswer every que	estion.	•		e You Own or Have an Interest In	ges, write your nam	ne and case i	iumber (ii known).
. Do you own or	have any legal or equitab	le interest in any r	esidence, b	ouilding, land, or similar property	?		
No. Go to Pa ■ Yes. Where	art 2.	·					
No. Go to Pa ■ Yes. Where  1.1  10226 Fir	art 2. is the property?	,	What is the ■ Singl	puilding, land, or similar property' property? Check all that apply le-family home ex or multi-unit building dominium or cooperative	Do not deduc the amount o	of any secured	ims or exemptions. Put I claims on Schedule D: Is Secured by Property.
No. Go to Pa ■ Yes. Where  1.1  10226 Fir	reside Dr	01 01 01 01 01 01 01 01 01 01 01 01 01 0	What is the Sing Dupl Conc Land Inves Time Othe	property? Check all that apply le-family home ex or multi-unit building dominium or cooperative ufactured or mobile home stment property eshare	Do not deduct the amount of Creditors When Current valuentire proper \$175  Describe the (such as fee	of any secured to Have Claim to Have Claim to Have Claim to Have of the entry?  5,500.00  e nature of your estimator of your estimple, tenator, if known.	I claims on Schedule D:

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

\$175,500.00

Part 2: Describe Your Vehicles

you have attached for Part 1. Write that number here.....

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<b>.</b>	es/				
~ 4		Kia	What are the second state of the second state	Do not deduct secured	claims or exemptions. Put
3.1	Make: Model:	Sorento	Who has an interest in the property? Check one  Debtor 1 only	the amount of any secu	ured claims on Schedule D: laims Secured by Property.
		2016	<u> </u>	Creditors who have C	iairiis Secureu by Property.
	Year:	nate mileage: 2600	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
	Outor iiii	omaton.	At least one of the deptors and another		
			Check if this is community property (see instructions)	\$21,600.00	\$21,600.00
3.2	Make:	Suzuki	Who has an interest in the property? Check one		claims or exemptions. Put ured claims on Schedule D:
	Model:	Equator	■ Debtor 1 only		laims Secured by Property.
	Year:	2011	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 59000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$7,800.00	\$7,800.00
3.3	Make:	Nissan	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Frontier	Debtor 1 only		ured claims on Schedule D: laims Secured by Property.
	Year:	2002	Debtor 2 only	Current value of the	Current value of the
	Approxir	nate mileage: 206000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
	Car p.	rchased by son. Titled			
	Car pu				
	in pare	ent's name for insurance ses only.	Check if this is community property (see instructions)	\$559.00 	\$559.00
	tercraft,	ent's name for insurance ses only.  aircraft, motor homes, ATVs an		accessories	\$559.00
Exa	in pare purpose tercraft, mples: B	aircraft, motor homes, ATVs an oats, trailers, motors, personal wat	(see instructions)  d other recreational vehicles, other vehicles, and	accessories essories entries for pages	\$29,959.00
Exa	tercraft, mples: B No /es	ent's name for insurance ses only.  aircraft, motor homes, ATVs an oats, trailers, motors, personal wat obtain value of the portion you ow attached for Part 2. Write that nu	d other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle acce	accessories essories entries for pages	
Exa	tercraft, mples: B No /es  dd the dd u have a	ent's name for insurance ses only.  aircraft, motor homes, ATVs an oats, trailers, motors, personal wat ollar value of the portion you ow attached for Part 2. Write that numbe Your Personal and Household It	d other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle acce	accessories essories entries for pages	
Exact	tercraft, mples: B No /es  Id the do u have a Description own of	ent's name for insurance ses only.  aircraft, motor homes, ATVs an oats, trailers, motors, personal wat ollar value of the portion you ow attached for Part 2. Write that numbe Your Personal and Household It	d other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle acce	accessories essories entries for pages	\$29,959.00  Current value of the portion you own?  Do not deduct secured
Exact  Solution  Fart 3  Do you  Solution  Do yo	tercraft, mples: B No /es  Describu own of	aircraft, motor homes, ATVs an oats, trailers, motors, personal wat ollar value of the portion you ow attached for Part 2. Write that number Your Personal and Household It or have any legal or equitable into goods and furnishings	d other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle acce	accessories essories entries for pages	\$29,959.00  Current value of the portion you own?  Do not deduct secured

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

	Case 16-	Document Page 17 of 55	Desc Main
Debtor 1 Debtor 2	Rizzo, Mich	ael J. & Rizzo, Elizabeth Case number (if known)	
■ Yes.	Describe		
		computers and electronics	\$200.00
Example No	bles of value les: Antiques and collections, I	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or memorabilia, collectibles	baseball card collections; other
9. Equipm Example  No	ent for sports a	nd hobbies  ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
■ No □ Yes.	ples: Pistols, rifle  Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories	
☐ No	Describe	ornes, rurs, teatrier coats, designer wear, snoes, accessories	
		clothes	\$200.00
■ No □ Yes.  13. Non-fa Exam ■ No □ Yes.	Describe  Irm animals  ples: Dogs, cats,  Describe		silver
■ No	Give specific inf	id household items you did not already list, including any health aids you did not list	
		of all of your entries from Part 3, including any entries for pages you have attached for mber here	\$1,800.00
Part 4: De	escribe Your Fina	ncial Assets	
Do you ov	vn or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		nave in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
Exam <sub>i</sub> □ No	institutions	avings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage house. If you have multiple accounts with the same institution, list each.  Institution name:	ses, and other similar
Yes.			

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 Debtor 2

Rizzo, Michael J. & Rizzo, Elizabeth

		17.1. Checking Accoun	Chase Bank Account #XXXXX7516	\$714.00
18	Bonds, mutual funds, or Examples: Bond funds, in		ge firms, money market accounts	
	☐ Yes	Institution or issuer nar	ne:	
19	Non-publicly traded stoc joint venture ■ No	k and interests in incorporate	ed and unincorporated businesses, including an interest in	an LLC, partnership, and
		mation about them Name of entity:	% of ownership:	
20	Negotiable instruments in	clude personal checks, cashiers	ole and non-negotiable instruments of checks, promissory notes, and money orders. of to someone by signing or delivering them.	
	☐ Yes. Give specific inform	nation about them Issuer name:		
21	□ No ′	A, ERISA, Keogh, 401(k), 403(	b), thrift savings accounts, or other pension or profit-sharing p	ans
	Yes. List each account s	'		
		Type of account: 401(k) or Similar Plan	Institution name: New Alberston's 401(k) Plan	\$150,741.60
		401(k) or Similar Plan	ALDI INC Retirement Savings Plan	\$53,960.16
22		leposits you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies,  Institution name or individual:	or others
23	. <b>Annuities</b> (A contract for a	a periodic payment of money to y	ou, either for life or for a number of years)	
	■ No		•	
	☐ Yes Issu	er name and description.		
24	26 U.S.C. §§ 530(b)(1), 52		ied ABLE program, or under a qualified state tuition progr	am.
	■ No □ YesInst	itution name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
25	Trusts, equitable or future	re interests in property (other	than anything listed in line 1), and rights or powers exerc	isable for your benefit
	☐ Yes. Give specific infor	mation about them		
26		emarks, trade secrets, and of n names, websites, proceeds fro	ther intellectual property om royalties and licensing agreements	
	☐ Yes. Give specific infor	mation about them		
27		d other general intangibles ts, exclusive licenses, cooperati	ve association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific infor	mation about them		

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Rizzo, Michael J. & Rizzo, Elizabeth Case number (if known)

Money or property owed to you?

Current value portion your

Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about to	them, including whether you already filed the retur	ns and the tax years	
	Tax Refund 2015 Federal	Federal	\$2,337.00
	2015 Illinois State Tax Refund	State	\$739.00
29. Family support  Examples: Past due or lump sum alim  No  Yes. Give specific information	ony, spousal support, child support, maintenanc	e, divorce settlement, property	settlement
30. Other amounts someone owes you  Examples: Unpaid wages, disability ins unpaid loans you made to  No □ Yes. Give specific information	surance payments, disability benefits, sick pay, va someone else	cation pay, workers' compensat	tion, Social Security benefits;
31. Interests in insurance policies  Examples: Health, disability, or life insu  No  ☐ Yes. Name the insurance company o  Compan		neowner's, or renter's insurance Beneficiary:	Surrender or refund
<ul> <li>32. Any interest in property that is due y If you are the beneficiary of a living trus died.</li> <li>■ No</li> <li>□ Yes. Give specific information</li> </ul>	you from someone who has died st, expect proceeds from a life insurance policy, or	rare currently entitled to receive	value: property because someone has
	r or not you have filed a lawsuit or made a de sputes, insurance claims, or rights to sue	mand for payment	
34. Other contingent and unliquidated c ■ No □ Yes. Describe each claim	laims of every nature, including counterclaim	is of the debtor and rights to s	set off claims
35. Any financial assets you did not alre  ■ No □ Yes. Give specific information	eady list		
	entries from Part 4, including any entries for p	<b>.</b> .	\$208,491.76
Part 5: Describe Any Business-Related Pro	perty You Own or Have an Interest In. List any real	estate in Part 1.	

 $\ensuremath{\mathsf{37}}.$  Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

page 5

Case 16-11222 Doc 1 Filed 03/31/16 Entered 03/31/16 16:51:05 Desc Main Page 20 of 55 Document Debtor 1 Rizzo, Michael J. & Rizzo, Elizabeth Case number (if known) Debtor 2 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 ..... \$175,500.00 Part 2: Total vehicles, line 5 \$29,959.00 Part 3: Total personal and household items, line 15 \$1,800.00 Part 4: Total financial assets, line 36 \$208,491.76

57. 58. Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$240,250.76 Copy personal property total \$240,250.76

\$415,750.76

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

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			Document	Ē	Page 21 of 55	•
Fil	l in this informa	ation to identify your o	case:			
De	ebtor 1	Michael J. Rizzo				
Do	ebtor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLIN	OIS, EASTERN DIVISION	
	ase number					Check if this is an amended filing
O <sup>·</sup>	fficial For	m 106C				
		<del></del>	operty You Cla	im	as Exempt	12/15
oro <sub>l</sub> out	perty you listed o	n Schedule A/B: Prope	erty (Official Form 106A/B) as yo	ur sou	irce, list the property that you claim a	oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if
spe app fun to a	ecific dollar amo plicable statutor ds—may be un	ount as exempt. Alterr ry limit. Some exempt limited in dollar amou ar amount and the val	natively, you may claim the fu ions—such as those for healt int. However, if you claim an o	ıll fair th aid: exem <sub>l</sub>	s, rights to receive certain benefit	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Pa	rt 1: Identify	the Property You Cla	im as Exempt			
1.	Which set of e	exemptions are you cl	aiming? Check one only, even	if you	r spouse is filing with you.	
	You are clair	ming state and federal n	onbankruptcy exemptions. 11	U.S.C	. § 522(b)(3)	
	☐ You are clair	ming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Sched	ule A/B that you claim as exe	mpt, f	ill in the information below.	
		n of the property and line nat lists this property	e on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
<u>De</u>	ebtor 1 Exem	<u>ptions</u>				TOT !! 00 5/40 004
	10226 Firesi	de Dr	\$175,500.00		\$15,000.00	735 ILCS 5/12-901
	Chicago Rid County : Co Line from Sche				100% of fair market value, up to any applicable statutory limit	
	Kia Sorento		\$21,600.00		\$2,400.00	735 ILCS 5/12-1001(c)
	2016 2600 Line from <i>Sche</i>	edule A/B. <b>3.1</b>			100% of fair market value, up to any applicable statutory limit	
	Kia Sorento		\$21,600.00	•	\$400.00	735 ILCS 5/12-1001(b)
	2016 2600 Line from <i>Sche</i>	edule A/B: <b>3.1</b>			100% of fair market value, up to any applicable statutory limit	
	Suzuki		\$7,800.00		\$1,400.00	735 ILCS 5/12-1001(b)
	Equator 2011				100% of fair market value, up to	

Official Form 106C

59000

Line from Schedule A/B: 3.2

100% of fair market value, up to any applicable statutory limit

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Suzuki Equator 2011	\$7,800.00		\$2,400.00 100% of fair market value, up to	735 ILCS 5/12-1001(c)
	59000 Line from <i>Schedule A/B</i> : 3.2			any applicable statutory limit	
	Nissan Frontier	\$559.00		\$559.00	735 ILCS 5/12-1001(b)
	2002 206000 Line from Schedule A/B 3.3			100% of fair market value, up to any applicable statutory limit	
	Household furnishings Line from Schedule A/B 6.1	\$1,400.00		\$1,400.00	735 ILCS 5/12-1001(b)
	Zine nom somedule / V.Z. G.T			100% of fair market value, up to any applicable statutory limit	
	computers and electronics Line from Schedule A/B 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	clothes Line from Schedule A/B 11.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Chase Bank Account #XXXXX7516 Line from Schedule A/B 17.1	\$714.00		\$714.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	New Alberston's 401(k) Plan Line from Schedule A/B 21.1	\$150,741.60			735 ILCS 5/12-1006
	Ellie Holli Genedale A/A 2111			100% of fair market value, up to any applicable statutory limit	
	ALDI INC Retirement Savings Plan Line from Schedule A/B 21.2	\$53,960.16			735 ILCS 5/12-1006
	Ellie Holli Goriedale / V.E. 2112			100% of fair market value, up to any applicable statutory limit	
	Tax Refund 2015 Federal Line from Schedule A/B 28.1	\$2,337.00		\$2,337.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	2015 Illinois State Tax Refund Line from Schedule A/B 28.2	\$739.00		\$739.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 No			on or after the date of adjustment.)	
	Yes. Did you acquire the property covered No	d by the exemption within	1,21	5 days before you filed this case?	
	□ Voc				

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						_		
Fill	in this inforn	nation to identify your case:						
Del	btor 1					]		
		First Name	Middle Name	L	ast Name	)		
_	btor 2 buse if, filing)	Elizabeth Rizzo First Name	Middle Name	L	ast Name			
Uni	ited States Ba	nkruptcy Court for the: NC	ORTHERN DISTRICT OF	ILLIN	OIS, EASTERN DIVISION			
	se number						Check if this is an amended filing	
Of	ficial Fo	rm 106C						
		e C: The Prope	erty You Cla	im	as Exempt		1	2/15
prop	erty you listed and attach to th	on Schedule A/B: Property (O	official Form 106A/B) as yo	ur sou	r, both are equally responsible for supurce, list the property that you claim a lary. On the top of any additional pages	s exempt. If r	nore space is needed,	, fill
app func to a app	licable statute ds—may be u particular do licable statute	ory limit. Some exemptions- nlimited in dollar amount. H llar amount and the value of	—such as those for healt owever, if you claim an e f the property is determin	h aid exem	market value of the property bein s, rights to receive certain benefits ption of 100% of fair market value b exceed that amount, your exemp	s, and tax-ex under a law	cempt retirement that limits the exem	-
1.	Which set of	exemptions are you claiming	ng? Check one only, even	if you	r spouse is filing with you.			
	You are cla	aiming state and federal nonba	nkruptcy exemptions. 11 l	J.S.C	. § 522(b)(3)			
	☐ You are cla	aiming federal exemptions. 11	U.S.C. § 522(b)(2)					
2.	For any prop	oerty you list on Schedule A	/B that you claim as exer	npt, f	ill in the information below.			
		on of the property and line on that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific lav	ws that allow exemption	n
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
<u>De</u>	btor 2 Exen Brief descripti Line from Sch	ion						
					100% of fair market value, up to any applicable statutory limit			
3.		ning a homestead exemptio ljustment on 4/01/16 and every			I on or after the date of adjustment.)			
	■ No							
	_		red by the exemption withir	1,21	5 days before you filed this case?			
	□ N							
	□ Ye	es						

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		Document Pag	ne 24 of 55		
Fill in this inforr	mation to identify your	case:			
Debtor 1	Michael J. Rizzo				
	First Name	Middle Name Last N	lame	• }	
Debtor 2	Elizabeth Rizzo			_	
(Spouse if, filing)	First Name	Middle Name Last N	lame		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	, EASTERN DIVISION	_	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Forr	m 106D				
		Who Have Claims Sec	ured by Propert	У	12/15
		two married people are filing together, both number the entries, and attach it to this for			
1. Do any creditors	s have claims secured by	your property?			
☐ No. Check	k this box and submit this	s form to the court with your other schedule	es. You have nothing else to re	port on this form.	
Yes. Fill in	n all of the information be	elow.			
Part 1: List A	All Secured Claims				
	claims. If a creditor has m	ore than one secured claim, list the creditor sep	Column A	Column B	Column C
for each claim. If m	nore than one creditor has	a particular claim, list the other creditors in Part al order according to the creditor 's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Kia Moto	rs Finance Co	Describe the property that secures the claim		\$21,600.00	\$0.00
Creditor's Nam	ne	2016 Kia Sorento			
10550 Ta		As of the date you file, the claim is: Check al	I that		
92708-60	Valley, CA	apply.			
		Contingent			
Number, Stree	et, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgag	e or secured		
■ Debtor 2 only		car loan)			
Debtor 1 and De	lehtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
	the debtors and another	☐ Judgment lien from a lawsuit	11011)		
☐ Check if this community de	laim relates to a	Other (including a right to offset)			
Date debt was inc		Last 4 digits of account number	8296		
		<u> </u>			
//	rgo Dealer	Describe the property that secures the clair	m: \$3,973.00	\$7,800.00	\$0.00
Services Creditor's Nam		2011 Suzuki Equator	Ψ5,575.00	Ψ1,000.00	Ψ0.00
		2011 Suzuki Equator			
PO Box 3	3569				
	Cucamonga, CA	As of the date you file, the claim is: Check al apply.	I that		
91729-35	69	Contingent			
Number, Stree	et, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgag	e or secured		
Debtor 2 only		car loan)			
Debtor 1 and De	•	Statutory lien (such as tax lien, mechanic's	lien)		
_	the debtors and another	☐ Judgment lien from a lawsuit			
Check if this community de		Other (including a right to offset)			
Date debt was inc	curred 10/01/2011	Last 4 digits of account number	2733		

Official Form 106D

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Debtor 1 Michael J. Rizzo		Cas	se number (f know)		
First Name Middle N	lame Last Name				
Debtor 2 Elizabeth Rizzo First Name Middle N	lame Last Name				
First Name Wildale N	danie Last Name				
2.3 Wells Fargo Home Mtg	Describe the property that secures the claim	ı:	\$168,729.00	\$175,500.00	\$0.00
Creditor's Name	10226 Fireside Dr, Chicago Ridge				
Written Correspondence	IL 60415-1311				
Resolutions MAC#X	As of the date you file, the claim is: Check all	that			
PO Box 10335 Des Moines, IA	apply.	inat			
_50306-0335	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)	or occured			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's l	ien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred09/14/2000	Last 4 digits of account number	903			
				_	
Add the dollar value of your entries in Collif this is the last page of your form, add the	lumn A on this page. Write that number here:		\$191,565.0	0	
Write that number here:	ie donai value totais nom an pages.	L	\$191,565.0	0	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed				
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt the owe to someone else, list the creditor in Part 1, it you listed in Part 1, list the additional creditor is page.	and then li	st the collection agen	cy here. Similarly, if you h	ave more
Name, Number, Street, City, State & .  Kia Motors Finance	Zip Code (	On which lin	e in Part 1 did you ente	er the creditor? 2.1	
10550 Talbert Ave Fountain Valley, CA 92708		ast 4 digits	of account number 8	296	
Name, Number, Street, City, State & Wells Fargo Hm Mortgag	Zip Code (	On which lin	e in Part 1 did you ente	er the creditor?	
7255 Baymeadows Wa Des Moines, IA 50306	1	₋ast 4 digits	of account number _7	903	
Name, Number, Street, City, State & Wfds/wds	Zip Code	On which lin	e in Part 1 did you ente	er the creditor? 2.2	
PO Box 1697 Winterville, NC 28590-1697		₋ast 4 digits	of account number	733_	

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	0430 10 11222 0	Document Page 26 of 55	.01.00 Description
Fill in this	information to identify your ca		
Debtor 1	Michael J. Rizzo		$\neg$
	First Name	Middle Name Last Name	- }
Debtor 2	Elizabeth Rizzo		_
(Spouse if, fili	ing) First Name	Middle Name Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	_
Case num	ber		
(if known)			☐ Check if this is an
			amended filing
Official	Form 106E/F		
		no Have Unsecured Claims	12/15
		Part 1 for creditors with PRIORITY claims and Part 2 for creditors with	
Schedule G: D: Creditors the Continu	Executory Contracts and Unexpires Who Have Claims Secured by Pro	nat could result in a claim. Also list executory contracts on Schedule A ed Leases (Official Form 106G). Do not include any creditors with partia perty. If more space is needed, copy the Part you need, fill it out, numb e no information to report in a Part, do not file that Part. On the top of an	ally secured claims that are listed in Schedule er the entries in the boxes on the left. Attach
Part 1:	List All of Your PRIORITY Uns	ecured Claims	
_ `	r creditors have priority unsecured	claims against you?	
No.	Go to Part 2.		
☐ Yes	i.		
Part 2:	List All of Your NONPRIORITY	Unsecured Claims	
_ `	y creditors have nonpriority unsections are nothing to report in this pa	red claims against you? rt. Submit this form to the court with your other schedules.	
■ Yes	i.	ŕ	
unsecu	red claim, list the creditor separately	ms in the alphabetical order of the creditor who holds each claim. If a conformation of the creditor who holds each claim. If a conformation of the claim it is. Do not I the other creditors in Part 3.If you have more than three nonpriority unsecured.	ist claims already included in Part 1. If more
			Total claim
4.1 <b>A</b> I	mex	Last 4 digits of account number 7463	\$6,201.00
No	onpriority Creditor's Name		
	orrespondence	When was the debt incurred?	
	O Box 981540 I Paso, TX 79998-1540		
	umber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
WI	ho incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$oldsymbol{l}$ At least one of the debtors and another	her Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a comm	unity Student loans	
de	ebt	Obligations arising out of a separation agreement or divo	rce that you did not
	the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other simila	r dobto
	No		uenis
	l Yes	Other. Specify	

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Debtor 1 Rizzo, Michael J. & Rizzo, Elizabeth Case number (if know) Debtor 2 4.2 Last 4 digits of account number \$6,186.00 Amex 4073 Nonpriority Creditor's Name When was the debt incurred? Correspondence PO Box 981540 El Paso, TX 79998-1540 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **Chase Card Services** Last 4 digits of account number 1822 \$6,433.00 Nonpriority Creditor's Name When was the debt incurred? **Attn: Correspondence Dept** PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **Chase Card Services** Last 4 digits of account number 2159 \$334.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Rizzo, Michael J. & Rizzo, Elizabeth Case number (if know) Debtor 2 4.5 Last 4 digits of account number \$5,561.00 Citibank/Best Buy 3819 Nonpriority Creditor's Name When was the debt incurred? Centralized Bankruptcy/CitiCorp Credit S PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 Citibank/Best Buy Last 4 digits of account number 9576 \$1,909.00 Nonpriority Creditor's Name When was the debt incurred? Centralized Bankruptcy/CitiCorp Credit S PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Discover Financial** Last 4 digits of account number 1117 \$8,276.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Rizzo, Michael J. & Rizzo, Elizabeth Case number (if know) Debtor 2 4.8 Last 4 digits of account number **Discover Financial** 1934 \$5,498.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.9 Synchrony Bank/Select Comfort \$2,124.00 Last 4 digits of account number 8200 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Amex Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 981537 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-1537 Last 4 digits of account number 7463 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Amex Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 981537 ■ Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-1537 Last 4 digits of account number 4073 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Chase Card** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 15298 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19850-5298 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1

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Debtor 1 Debtor 2 Rizzo, Michael J. & Rizzo,	Elizabeth	Case number (f know)		
Chase Card	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 15298 Wilmington, DE 19850-5298		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Willington, DE 13030-3230	Last 4 digits of account number	2159		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
Citi	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
701 E 60th St N Sioux Falls, SD 57104-0432		■ Part 2: Creditors with Nonpriority Unsecured Claims		
310ux 1 alis, 3D 37 104-0432	Last 4 digits of account number	3819		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
Citi	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
701 E 60th St N Sioux Falls, SD 57104-0432		■ Part 2: Creditors with Nonpriority Unsecured Claims		
310ux 1 alis, 3D 37 104-0432	Last 4 digits of account number	9576		
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Discover Fin Svcs LLC	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 15316 Wilmington, DE 19850-5316		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Willington, DE 19030-3310	Last 4 digits of account number	1117		
Name and Address	On which entry in Part 1 or Part 2 d			
Discover Fin Svcs LLC	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
PO Box 15316 Wilmington, DE 19850-5316		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Willington, DE 13000 0010	Last 4 digits of account number	1934		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
Syncb/Sleep Number	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
C/o PO Box 965036		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5036				
	Last 4 digits of account number	8200		

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	42,522.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	42,522.00

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		Docume	<u>'III Paue 31 015:</u>	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Michael J. Rizzo				
	First Name	Middle Name	Last Name	)	
Debtor 2	Elizabeth Rizzo				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DI	VISION	
Case number (if known)					☐ Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1		name, number	, Street, City, State and Zir	Code	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
.2	Name				<u> </u>
	Number	Street			
_	City		State	ZIP Code	
.3	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
.4					
	Name				
	Number	Street			<del></del>
	City		State	ZIP Code	
.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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	Docume	ent Page 32 d	of 55	
ormation to identify your	case:			
Michael I Dizze				
First Name	Middle Name	Last Name		
Flizabeth Rizzo				
First Name	Middle Name	Last Name		
Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	N DIVISION	
				☐ Check if this is an
				amended filing
people or entities who ar ther, both are equally response entries in the boxes on	e also liable for any debts consible for supplying co the left. Attach the Additi	rrect information. If mo	ore space is needed, copy the	Additional Page, fill it out,
,	•	o not list either spouse as	s a codebtor.	
Idaho, Louisiana, Nevada, to line 3.	New Mexico, Puerto Rico,	Texas, Washington, an		and territories include Arizona,
iin as a codebtor only if th hedule E/F (Official Form 	at person is a guarantor	or cosigner. Make sure	e you have listed the creditor of the Schedule D, Schedule E/F, of	on Schedule D (Official Forn or Schedule G to fill out
	IP Code		Column 2: The creditor to Check all schedules that a	
			□ Schodulo D. line	
ie				
ber Street	State	ZIP Code		
			☐ Schedule D, line	
e			☐ Schedule E/F, line	
			☐ Schedule G, line	
her Street			_	
	State	ZIP Code		
	Michael J. Rizzo First Name  Elizabeth Rizzo First Name  Bankruptcy Court for the:  Form 106H  Le H: Your Code  People or entities who are ther, both are equally response entries in the boxes on if known). Answer every contained any codebtors? (If your codebtors) that all of your codebtors are codebtor only if the code in as a codebtor only if the code E/F (Official Form code).  Form 106H  Le H: Your Codebtors (If your codebtors) that all of your codebtors are codebtor only if the code E/F (Official Form code).  Form 106H  Le H: Your codebtor codebtor code (If your codebtors) that all of your codebtors are codebtor code (If your codebtors).  Form 106H  Le H: Your Codebtor codebtor code (If your codebtors) that all of your codebtors (If your codebtors) that all your codeb	Michael J. Rizzo First Name Middle Name Elizabeth Rizzo First Name Middle Name Bankruptcy Court for the: MORTHERN DISTRICT  Form 106H Be H: Your Codebtors  Topeople or entities who are also liable for any debtather, both are equally responsible for supplying cone entries in the boxes on the left. Attach the Additific known). Answer every question.  Thave any codebtors? (If you are filing a joint case, do the last 8 years, have you lived in a community production of the last 8 years, have you lived in a community production. It is all of your codebtors. Do not include your solin as a codebtor only if that person is a guarantor hedule E/F (Official Form 106E/F), or Schedule G (Community, Street, City, State and ZIP Code  Street State  Street State	Michael J. Rizzo First Name Middle Name Last Name Elizabeth Rizzo First Name Middle Name Last Name Elizabeth Rizzo First Name Middle Name Last Name Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTER  NORTHERN DISTRICT OF ILLINOIS, EASTER  Torm 106H Be H: Your Codebtors  The people or entities who are also liable for any debts you may have. Be as ther, both are equally responsible for supplying correct information. If more entries in the boxes on the left. Attach the Additional Page to this page if known). Answer every question.  Thave any codebtors? (If you are filing a joint case, do not list either spouse as the last 8 years, have you lived in a community property state or territory, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and to line 3.  If your spouse, former spouse, or legal equivalent live with you at the time?  In 1, list all of your codebtors. Do not include your spouse as a codebtor in in as a codebtor only if that person is a guarantor or cosigner. Make sure hedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Us the street Street State ZIP Code	Michael J. Rizzo First Name Middle Name Last Name  Elizabeth Rizzo First Name Middle Name Last Name  Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION  From 106H  The H: Your Codebtors  People or entities who are also liable for any debts you may have. Be as complete and accurate as pother, both are equally responsible for supplying correct information. If more space is needed, copy the entire is in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional If known). Answer every question.  Thave any codebtors? (If you are filling a joint case, do not list either spouse as a codebtor.  The last 8 years, have you lived in a community property state or territory? (Community property states at Judaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  To line 3.  It list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with your spouse, former spouse, or legal equivalent live with you at the time?  11, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with your as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor to the code of the community of the property of the code of the co

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Fill	in this information to identify your	case:				
Del	btor 1 Michael J	. Rizzo		_		
1	btor 2 Elizabeth	Rizzo		_		
Uni	ited States Bankruptcy Court for t	he: NORTHERN DISTRIC	CT OF ILLINOIS, EASTERN	_		
(lf kr	se number		-		ck if this is: An amended filing A supplement showing pos income as of the following o	
_	fficial Form 106l			Ī	MM / DD/ YYYY	
S	chedule I: Your In	come				12/15
spo atta	plying correct information. If youse. If you are separated and youch a separate sheet to this form  The separate sheet to the separate sheet to the separate sheet to the separate sheet to the separate sheet she	our spouse is not filing wit . On the top of any additio	h you, do not include informa	ation about	your spouse. If more spa	ace is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing	spouse
	If you have more than one job,	Fundament status	■ Employed		■ Employed	
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not employed	
	employers.	Occupation	Assistant Manager		Shift Manage	
	Include part-time, seasonal, or self-employed work.	Employer's name	Jewel food Stores		ALDI, INC	
	Occupation may include studer homemaker, if it applies.	nt or <b>Employer's address</b>	2501 W Grandview Rd Phoenix, AZ 85023-310		197 E Division Rd Valparaiso, IN 4638	3-7869
		How long employed the	here? 25 years and 5	months	14 years	
Pai	rt 2: Give Details About M	onthly Income				
	imate monthly income as of the ess you are separated.	date you file this form. If y	ou have nothing to report for an	y line, write \$	0 in the space. Include you	ır non-filing spouse
	ou or your non-filing spouse have mode, attach a separate sheet to this		bine the information for all emplo	oyers for that	person on the lines below.	If you need more
				For De	For Debtor 1 non-filing s	
2.	List monthly gross wages, sa deductions). If not paid monthly			\$	2,725.21 \$ 3,	380.19
3.	Estimate and list monthly over	ertime pay.	3.	+\$	0.00 +\$	18.41
4.	Calculate gross Income. Add	line 2 + line 3.	4.	\$ 2.7	25.21 \$ 3.39	08.60

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	tor 1 tor 2	Rizzo, Michael J. & Rizzo, Elizabeth	_	Case	number (if known)			
				For	Debtor 1		btor 2 or ing spouse	
	Сор	y line 4 here	4.	\$	2,725.21	\$	3,398.60	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	74.63	\$	657.44	
	5b.	Mandatory contributions for retirement plans	5b.	<u>\$</u> —	0.00	<u>\$</u> —	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	34.55	\$	169.68	
	5d.	Required repayments of retirement fund loans	5d.	<u> </u>	57.80	\$	141.58	
	5e.	Insurance	5e.	<b>\$</b>	58.45	\$	27.10	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	5.86	\$	0.00	
	5h.	Other deductions. Specify: Vision Ins Pre	5h.+	\$	1.13	+ \$	1.17	
		Dental Ins Pre		\$	2.17	\$	2.47	
		Long Term Disablity		\$	1.69	\$	0.00	
				\$	0.00	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	236.28	\$	999.44	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,488.93	\$	2,399.16	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$ _	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		<b>'</b> —				
		settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
	8d.	Unemployment compensation Social Security	8d.	\$_	0.00	\$	0.00	
	8e. 8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e. 8f.	\$ \$	0.00	\$ \$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,488.93 + \$_	2,399	<b>0.16</b> = \$ 4,8	88.09
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not available:	ependen				<i>J.</i> 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result is the thing of the same amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ <b>4,8</b>	88.09
13.	Do y	you expect an increase or decrease within the year after you file this form?	?				monthly inc	ome
		No.						
		Yes. Explain:						

Fill	in this informa	ation to identify you	ur case:			ı		
	tor 1	Michael J. Ri				Check	k if this is:	
	101 1	Wilchael J. Ki	220				An amended filing	
1	tor 2	Elizabeth Riz	zo					ing postpetition chapter 13
(Spo	ouse, if filing)					-	expenses as of the	following date:
Unit	ed States Bank	ruptcy Court for the:		IERN DISTRICT OF ILLIN RN DIVISION	OIS,	<u> </u>	MM / DD / YYYY	
	e number nown)							
		orm 106J						
So	chedule	J: Your E	Expen	ses				12/1
info	ormation. If m known). Answ		ded, attac n.	If two married people are th another sheet to this fo				
1.	ls this a joir							
	☐ No. Go to	o line 2.						
	■ Yes. Doe	es Debtor 2 live in	a separa	te household?				
	■ N		t file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Househ	noldof Debtor	2.	
2.	Do you hay	e dependents?	□ No					
۷.	Do not list D Debtor 2.		Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
								□ No
	Do not state dependents				Son		17	■ Yes
								□ No
					Daughter		14	■ Yes □ No
					Son		12	■ Yes
								□ No
3.	expenses o	penses include f people other the d your dependen	an ┌	No Yes				☐ Yes
exp app	imate your ex enses as of a blicable date.	a date after the ba	ur bankru ankruptcy	y Expenses ptcy filing date unless yo is filed. If this is a supple	emental Schedule J			
valı		sistance and hav		d it on Schedule I: Your i			Your expo	enses
4.		or home ownersh nd any rent for the		ses for your residence. Industrial	clude first mortgage	4. \$		1,311.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		250.00
		erty, homeowner's,	or renter's	insurance		4a. \$ 4b. \$		250.00 50.00
		e maintenance, rep				4c. \$	-	0.00
		eowner's association	-			4d. \$		0.00
5.				ur residence, such as hom	ne equity loans	5. \$		0.00

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6a. 6b. 6c. 6d.	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6a. \$ 6b. \$	135.00
6a. 6b. 6c. 6d.	Electricity, heat, natural gas Water, sewer, garbage collection	·	135 00
6c. 6d.	Water, sewer, garbage collection	6h ¢	
6d.		OD. J	67.00
		6c. \$	365.00
. Fo	Other. Specify:	6d. \$	0.00
	od and housekeeping supplies	7. \$	450.00
. Ch	Idcare and children's education costs	8. \$	0.00
. Clo	thing, laundry, and dry cleaning	9. \$	0.00
	sonal care products and services	10. \$	100.00
	dical and dental expenses	11. \$	340.00
	nsportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	
	not include car payments.	12. \$	225.00
3. <b>En</b> t	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
4. <b>Ch</b>	aritable contributions and religious donations	14. \$	0.00
5. <b>Ins</b>	urance.		
	not include insurance deducted from your pay or included in lines 4 or 20.		
	. Life insurance	15a. \$	0.00
	. Health insurance	15b. \$	0.00
-	. Vehicle insurance	15c. \$	285.00
	l. Other insurance. Specify:	15d. \$	0.00
	<b>tes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.	400	
	ecify:	16. \$	0.00
	tallment or lease payments:	170 ¢	245.00
	. Car payments for Vehicle 1	17a. \$	315.00
	Car payments for Vehicle 2	17b. \$	445.00
	Other Specify:	17c. \$	0.00
	l. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not rep lucted from your pay on line 5, Schedule I, Your Income (Official Form		0.00
	ner payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	0.00
	er real property expenses not included in lines 4 or 5 of this form or or		
20a		20a. \$	0.00
20k	. Real estate taxes	20b. \$	0.00
200	. Property, homeowner's, or renter's insurance	20c. \$	350.00
200	I. Maintenance, repair, and upkeep expenses	20d. \$	0.00
206	. Homeowner's association or condominium dues	20e. \$	0.00
1. <b>Otł</b>	er: Specify:	21. +\$	0.00
	· · ·		3.33
	culate your monthly expenses	•	4 700 00
	a. Add lines 4 through 21.	\$	4,788.00
	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1		
220	. Add line 22a and 22b. The result is your monthly expenses.	\$	4,788.00
3. <b>C</b> al	culate your monthly net income.	L	
	. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,888.09
	Copy your monthly expenses from line 22c above.	23b\$	4,788.00
			<del>4,700.00</del>
230	. Subtract your monthly expenses from your monthly income.		
_50	The result is your <i>monthly net income</i> .	23c. \$	100.09
	you expect an increase or decrease in your expenses within the year a		one or deercase because of
	example, do you expect to finish paying for your car loan within the year or do you ex lification to the terms of your mortgage?	bect your mongage payment to increa	ase of decrease decause of a
	, 5 5		
	Yes. Explain here:		

Fill in this inform	nation to identify your o	case:						
Debtor 1	Michael J. Rizzo							
	First Name	Middle Name	Last	Name	—— )			
Debtor 2	Elizabeth Rizzo							
(Spouse if, filing)	First Name	Middle Name	Last	Name				
United States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS	S, EASTERN DIVISIO	N N			
Case number								
(if known)							Check if this is amended filing	an
Official Forn	n 106Dec							
	ion About a	n Individua	al Dobte	or's School	luloc			
Deciarat	IOII ADOUL a	III IIIUIVIUU	ai Debit	JI S Sched	iules			12/15
obtaining money	s form whenever you fil or property by fraud in 3 U.S.C. §§ 152, 1341, 15	connection with a ban						
Sign	n Below							
Did you pay	y or agree to pay some	one who is NOT an atto	orney to help y	ou fill out bankruptc	y forms?			
■ No								
☐ Yes. N	lame of person						tition Preparer's Nature (Official For	
	ity of perjury, I declare to	hat I have read the sun	nmary and sch	nedules filed with thi	s declaration	and		
х			х					
	el J. Rizzo			Elizabeth Rizzo				
Signatur	re of Debtor 1			Signature of Debtor 2	2			

Date March 29, 2016

Date March 29, 2016

C	Case 16-11222	Doc 1	Filed 03/31/16	Entered 03/31/16 16:5	1:05	Desc Main
Fill in this info	ormation to identify yo	ur case:				
Debtor 1	Michael J. Rizz		ddle Name	Last Name	7	
Debtor 2 (Spouse if, filing)	Elizabeth Rizz	~	ddle Name	Last Name		
United States I	Bankruptcy Court for the	: NORTH	HERN DISTRICT OF ILL	INOIS, EASTERN DIVISION		
Case number (if known)						☐ Check if this is an amended filing
	orm 106Sum	s and Li	abilities and Ce	ertain Statistical Inform	ation	12/15
information. Fi your original fo	II out all of your sched orms, you must fill out	ules first; th	en complete the inform	g together, both are equally respon lation on this form. If you are filing at the top of this page.		
Part 1: Sum	marize Your Assets					
						Your assets

Value of what you own Schedule A/B: Property (Official Form 106A/B) 175,500.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 240,250.76 1c. Copy line 63, Total of all property on Schedule A/B..... 415,750.76 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2. 191,565.00 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F...... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F..... 42,522.00 Your total liabilities 234,087.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income(Official Form 106I) 4,888.09 Copy your combined monthly income from line 12 oSchedule I..... Schedule J: Your Expenses (Official Form 106J) 4.788.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 1 Debtor 2 Rizzo, Michael J. & Rizzo, Elizabeth

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	<b>Total claim</b>	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in	this inforr	mation to identify your	case:				
Debto	or 1	Michael J. Rizzo					
Debto	or 2	First Name  Elizabeth Rizzo	Middle Name	La	st Name		
	e if, filing)	First Name	Middle Name	La	st Name		
Unite	d States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINO	IS, EASTERN DIVI	SION	
Case	number						
(if knov	_					<u> </u>	Check if this is an amended filing
Offi	cial Fo	rm 107					
			Affairs for Indivi	duals l	Filina for B	ankruptcv	12/15
						qually responsible for suppl	ving correct
nform	nation. If m	nore space is needed,				additional pages, write your	
if kno	wn). Answ	er every question.					
Part '	Give I	Details About Your Ma	rital Status and Where You	Lived Bef	ore		
1. V	Vhat is you	r current marital statu	s?				
	Married	İ					
	☐ Not ma	rried					
2. D	ouring the I	ast 3 years, have you	lived anywhere other than w	where you	live now?		
	No						
-	_	st all of the places you liv	red in the last 3 years. Do not	include wh	ere you live now.		
ı	Debtor 1 Pi	rior Address:	Dates Debtor 1	lived	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			there				lived there
						y property state or territory	
states	and territor	<i>i</i> es include Arizona, Cal	fornia, Idaho, Louisiana, Nev	vada, New	Mexico, Puerto Ric	o, Texas, Washington and Wi	sconsin.)
	No						
	Yes. Ma	ake sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offi	icial Form	106H).		
Part 2	2 Expla	in the Sources of You	· Income				
F	ill in the tota	al amount of income you	Iployment or from operating In received from all jobs and a ave income that you receive to	all business	ses, including part-t		dar years?
Г	□ No						
	-	II in the details.					
			D. ( )			D.1.	
			Debtor 1	Crees	incomo	Debtor 2 Sources of income	Gross income
			Sources of income Check all that apply.		income deductions and ons)	Check all that apply.	(before deductions and exclusions)
For la	ast calenda	ır year:	■ Wages, commissions,		\$31,640.12	■ Wages, commissions,	\$65,250.82
(Janu	ary 1 to De	ecember 31, 2015 )	bonuses, tips		•	bonuses, tips	,
			☐ Operating a business			☐ Operating a business	

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Debtor 1
Debtor 2
Rizzo, Michael J. & Rizzo, Elizabeth

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Cas

Debtor 1

Case number (if known)

Debtor 2

					of income that apply.		s income e deductions and ions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
		dar year befo December 3		■ Wages	Wages, commissions, susses, tips \$45,757.72		■ Wages, conbonuses, tips	nmissions,	\$45,459.87	
				☐ Operat	ing a business			Operating a	business	
5.	Include incother publication you are fili	come regardle ic benefit payr ng a joint caso	ess of whethe ments; pension and you ha	er that incomons; rental inverse the	e is taxable. Exam ncome; interest; di nat you received to	nples of <i>ot</i> vidends; r gether, lis		n lawsuits; royalties Debtor 1.	s; and gamblir	rity, unemployment, and ng and lottery winnings. If
	□ No									
	Yes.	Fill in the det	ails.							
				Debtor 1				Debtor 2		
				Sources of Describe b			e deductions and ions)	Sources of income Describe below		Gross income (before deductions and exclusions)
	For last calendar year: Jewel (January 1 to December 31, 2015 ) Inc		_	ood Stores,	\$20,220.48	ALDI INC IL	ALDI INC ILLINOIS			
		dar year befo December 3		Jewel Fo	ood Stores		\$45,757.72	ALDI INC		\$45,459.87
Par	•	r Debtor 1's o Neither Del individual pr	or Debtor 2's otor 1 nor D imarily for a p 0 days befor Go to line 7	s debts prir ebtor 2 has personal, far re you filed f	nily, or household or bankruptcy, did	debts? Imer debt purpose."	s. Consumer debts  ny creditor a total of	\$6,225* or more?	,	8) as "incurred by an base of a second to the second to th
			creditor. Do payments to	not include an attorney	payments for do	mestic su cy case.		uch as child suppo	ort and alimon	y. Also, do not include
	■ Yes.				primarily consuor bankruptcy, did		s. ny creditor a total of	\$600 or more?		
		No.	Go to line 7							
		☐ Yes		or domestic						editor. Do not include ments to an attorney for
	Creditor	's Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

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	btor 1 btor 2 Rizzo, Michael J. & Rizzo, Elizak	peth	Cas	se number (if known)		
7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general partr which you are an officer, director, person in cont business you operate as a sole proprietor. 11 U.	ners; relatives of any generator, or owner of 20% or mo	al partners; partnershi re of their voting secu	ps of which you are rities; and any mar	e a general part naging agent, in	ner; corporations of cluding one for a
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptcinsider? Include payments on debts guaranteed or cosig		ments or transfer ar	ny property on ac	count of a dek	ot that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures	Para	<b></b> 5.110		
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.  ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No  Yes. Fill in the information below.		erty repossessed, fo	reclosed, garnish	ned, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			
11.	Within 90 days before you filed for bankrups accounts or refuse to make a payment becan a No  Yes. Fill in the details.		uding a bank or fina	ancial institution,	set off any am	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was า	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an		rty in the possession	on of an assignee	for the benefi	t of creditors, a
	☐ Yes					
Pai	List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt  ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts	s with a total value o	of more than \$600	per person?	
	Gifts with a total value of more than \$600 p person	er Describe the gifts		Date: the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and					

Address:

Case 16-11222 Doc 1 Filed 03/31/16 Entered 03/31/16 16:51:05 Desc Main Page 43 of 55 Document Debtor 1 Rizzo, Michael J. & Rizzo, Elizabeth Case number (if known) Debtor 2 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Date of your Value of property Describe any insurance coverage for the loss how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of **Address** transferred transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 1500.00 March 9, 2016 \$1,500.00 Danielle E. Colyer, Attorney at Law 161 N Clark St Ste 4700 Chicago, IL 60601-3201 www.colyerlaw.net.net Abacus Credit Counseling 3/28/2016 \$25.00 17337 Ventura Blvd Ste 226 Encino. CA 91316-3999 www.abacusscc.org 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment or **Address** transferred transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of Describe any property or property transferred payments received or debts

paid in exchange

Date transfer was made

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#### Part 10: Give Details About Environmental Information

Chicago Ridge, IL 60415-1311

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations

60415-1311

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	otor 1 otor 2 _	Rizzo, Michael J. & Rizzo, Elizabe	eth	J	_	mber (if known)	
	control	ling the cleanup of these substances,	wastes, or material.				
		ans any location, facility, or property perate, or utilize it, including disposal	-	environmental lav	v, whethe	r you now own, operate, or	utilize it or used to
		ous material <mark>means anything an envir</mark> I, pollutant, contaminant, or similar te		as a hazardous w	aste, haza	ardous substance, toxic su	bstance, hazardou
Rep	ort all no	otices, releases, and proceedings that	you know about, reg	ardless of when th	ey occur	red.	
24.	Has any	governmental unit notified you that	you may be liable or p	ootentially liable u	nder or in	violation of an environme	ntal law?
	■ No	s. Fill in the details.					
	Name of Address	of site SS (Number, Street, City, State and ZIP Code)	Governmental u Address (Number ZIP Code)	nit , Street, City, State and	Envir know	ronmental law, if you / it	Date of notice
25.	Have yo	ou notified any governmental unit of a	ny release of hazardo	ous material?			
	■ No	s. Fill in the details.					
	Name of Address	of site SS (Number, Street, City, State and ZIP Code)	Governmental u Address (Number ZIP Code)	nnit , Street, City, State and	Envir know	ronmental law, if you vit	Date of notice
26.	Have yo	ou been a party in any judicial or admi	inistrative proceeding	under any enviro	nmental I	law? Include settlements ar	nd orders.
	■ No						
	☐ Ye	s. Fill in the details.					
	Case N	itle lumber	Court or agency Name Address (Number and ZIP Code)		Nature of	f the case	Status of the case
Par	t 11: G	ive Details About Your Business or C		ısiness			
		4 years before you filed for bankruptc	<u>-</u>		of the foll	lowing connections to any	business?
		A sole proprietor or self-employed in	a trade, profession, o	or other activity, ei	ther full-t	time or part-time	
		A member of a limited liability compa	ny (LLC) or limited lia	bility partnership	(LLP)		
		A partner in a partnership					
		An officer, director, or managing exe	cutive of a corporatio	n			
		An owner of at least 5% of the voting	or equity securities o	f a corporation			
	■ No	. None of the above applies. Go to Pa	rt 12.				
	☐ Ye	s. Check all that apply above and fill i	n the details below fo	r each business.			
	Addres		Describe the nature	of the business		ployer Identification numbe not include Social Security	
	(Number	, Street, City, State and ZIP Code)	Name of accountant	or bookkeeper	Date	es business existed	
28.		2 years before you filed for bankruptc ons, creditors, or other parties.	y, did you give a finaı	ncial statement to	anyone a	bout your business? Includ	de all financial
	■ No	s. Fill in the details below.					

Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

**Date Issued** 

(Number, Street, City, State and ZIP Code)

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Debtor 1 Debtor 2	Rizzo, Michael J. & Rizzo, Elizabeth	Case number (if known)	
•	y case can result in fines up to \$250,000, or §§ 152, 1341, 1519, and 3571.	· imprisonn	nent for up to 20 years, or both.
	J. Rizzo e of Debtor 1		abeth Rizzo ature of Debtor 2
Date M	arch 29, 2016	Date	March 29, 2016
Did you at ■ No □ Yes	tach additional pages to Your Statement of	Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pa	ay or agree to pay someone who is not an a	ttorney to	help you fill out bankruptcy forms?
☐ Yes. Na	ame of Person Attach the Bankruptcy i	Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	mation to identify your cas	se:			irected in this form and	in Form
Debtor 1	Michael J. Rizzo		12	22A-1Supp:		
Debtor 2 (Spouse, if filing)	Elizabeth Rizzo			■ 1. There is no pres	umption of abuse	
	Bankruptcy Court for the:	Northern District of Illinois, Eastern Division		applies will be n	o determine if a presum nade under <i>Chapter 7 M</i> cial Form 122A-2).	•
Case number					does not apply now bec out it could apply later.	ause of qualified
				☐ Check if this is a	in amended filing	
Official F	orm 122A - 1					
Chapter	7 Statement of	of Your Current Monthly	Inc	ome		12/1
Part 1: Ca	complete and file Statemer					
	our marital and filing sta	•				
_	arried. Fill out Column A,		Ľ	0.44		
l _		ing with you. Fill out both Columns A and E OT filing with you. You and your spouse a		<b>2-11.</b>		
l	, ,	Id and are not legally separated. Fill out be		umns A and B. lines 2-	11.	
☐ <b>Livi</b>	ng separately or are legarately or perjury that you and	ally separated. Fill out Column A, lines 2-11 dyour spouse are legally separated under nor noclude evading the Means Test requirements	; do no bankru	ot fill out Column B. By uptcy law that applies or	checking this box, you	
101(10A). For 6 months, add	example, if you are filing on the income for all 6 months	you received from all sources, derived during t September 15, the 6-month period would be Marc and divide the total by 6. Fill in the result. Do not in the from that property in one column only. If you ha	n 1 thro iclude a	ugh August 31. If the amouny income amount more t	unt of your monthly income han once. For example, if	e varied during the
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	

2,620.39

0.00

4,444.31

0.00

roommates. Include regular contributions from a spouse only if Column B is not filled in. 0.00 0.00 Do not include payments you listed on line 3 5. Net income from operating a business, profession, or farm Debtor 1 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property 0.00 0.00 7. Interest, dividends, and royalties

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all

Alimony and maintenance payments. Do not include payments from a spouse if

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and

payroll deductions).

Column B is filled in.

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Debtor 1 Debtor 2 Rizzo, Michael J. & Rizzo, Elizabeth

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing		1
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefi	it under the					
	For you\$		0.00					
	For your spouse \$		0.00					
9.	<b>Pension or retirement income.</b> Do not include any amounder the Social Security Act.	ount received that wa	s a benefit	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spec not include any benefits received under the Social Securi a victim of a war crime, a crime against humanity, or inter If necessary, list other sources on a separate page and p	ty Act or payments re national or domestic	eceived as	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.			\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	2,620.39	<b>+</b> \$ _	4,444.31		7,064.70
Part	2: Determine Whether the Means Test Applies to	You						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11	here=>	\$	7,064.70
	Multiply by 12 (the number of months in a year)						<b>x</b> 1	2
	12b. The result is your annual income for this part of the	form				12b	s. \$8	4,776.40
13.	Calculate the median family income that applies to y	ou. Follow these ste	eps:					
	Fill in the state in which you live.	IL						
	Fill in the number of people in your household.	5						
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link	specified in	n the separa	te instruct	13. tions for this	\$9	4,918.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Of	n the top of page 1,	check box	1T,here is no <sub>l</sub>	presumpti	ion of abuse.		
	Go to Part 3.  14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	: 2Ţhe presı	umption of ab	ouse is de	termined by Fo	orm 122A-	2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury the	nat the information or	n this staten	nent and in a	ny attachr	ments is true a	nd correct	
	X	x						
	Michael J. Rizzo		Elizabe	th Rizzo	,			
	Signature of Debtor 1  Date March 29, 2016	Date	Signature  March 2	e of Debtor 2				
	MM / DD / YYYY	Date	MM / DD					
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.						

Certificate Number: 12459-ILN-CC-027207857



### **CERTIFICATE OF COUNSELING**

I CERTIFY that on March 29, 2016, at 3:23 o'clock PM PDT, Michael Rizzo received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 31, 2016 By: /s/Fatima Munekata

Title: Credit Counselor

Name: Fatima Munekata

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 12459-ILN-CC-027207927



### **CERTIFICATE OF COUNSELING**

I CERTIFY that on March 29, 2016, at 3:23 o'clock PM PDT, Elizabeth Rizzo received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 31, 2016

By: /s/Fatima Munekata

Name: Fatima Munekata

Title: Credit Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11222 Doc 1 Filed 03/31/16 Entered 03/31/16 16:51:05 Desc Main Document Page 55 of 55

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re	Rizzo, Michael J. & Rizzo, Elizabeth		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTO	ORNEY FOR D	EBTOR			
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptc	y, or agreed to be paid	to me, for services r			
	For legal services, I have agreed to accept		\$	1,500.00			
	Prior to the filing of this statement I have received		\$	1,500.00			
	Balance Due		\$	0.00			
2. 7	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. 7	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4. l	■ I have not agreed to share the above-disclosed comper firm.	ensation with any other person	n unless they are men	nbers and associates of	of my law		
ļ	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A		
5. 1	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
t c	a. Analysis of the debtor's financial situation, and render by Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed]	ment of affairs and plan which	ch may be required;	-	kruptcy;		
6. I	By agreement with the debtor(s), the above-disclosed fee	does not include the following	ng service:				
		CERTIFICATION					
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the	debtor(s) in		
M	arch 29, 2016						
Date		Danielle E. Colye Signature of Attorn Danielle E. Colye		,			
		161 N Clark St St Chicago, IL 6060 (312) 922-5152 dcolyer@colyerl	1-3201 Fax: (312) 922-515	3			
		Name of law firm	uwillet				